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## BIB DATA SHEET

CONFIRMATION NO. 7559

|   |   |                                   |   |  |                                    |
|---|---|-----------------------------------|---|--|------------------------------------|
| <b>SERIAL NUMBER</b><br>10/717,291  | <b>FILING or 371(c)<br/>DATE</b><br>11/19/2003<br><b>RULE</b>   | <b>CLASS</b><br>382               | <b>GROUP ART UNIT</b><br>2624   | <b>ATTORNEY DOCKET<br/>NO.</b><br>87225PCW |                                    |
| <b>APPLICANTS</b><br>Lawrence A. Ray, Rochester, NY;<br><b>** CONTINUING DATA *****</b> none A.A<br><b>** FOREIGN APPLICATIONS *****</b> none A.A<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>03/02/2004   |   |                                   |   |  |                                    |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and /ANDRAE S<br>ALLISON/<br>Acknowledged Examiner's Signature | <input type="checkbox"/> Met after Allowance<br>AA<br>Initials  | <b>STATE OR<br/>COUNTRY</b><br>NY | <b>SHEETS<br/>DRAWINGS</b><br>5   | <b>TOTAL<br/>CLAIMS</b><br>8               | <b>INDEPENDENT<br/>CLAIMS</b><br>1 |
| <b>ADDRESS</b><br>Pamela R. Crocker<br>Patent Legal Staff<br>Eastman Kodak Company<br>343 State Street<br>Rochester, NY 14650-2201<br>UNITED STATES   |   |                                   |   |  |                                    |
| <b>TITLE</b><br>Optimal templates for image data embedding  |   |                                   |   |  |                                    |
| <b>FILING FEE<br/>RECEIVED</b><br>770   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                    |